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′ r	UTILITY PATENT APPLICATION	ATTORNEY DOCKET 82859LMB	
	TRANSMITTAL UNDER 37 CFR 1.53(b)	Customer No. 01333	
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	To: Commissioner for Patents	Express Man Laber No.	
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	First Named Inventor (or Application Identifier):	1 = 1	
	Narasimharao Dontula, et al		
	Enclosed are:		
	1. X Specification	X Assignment of the invention to	
	• • • • • • • • • • • • • • • • • • • •	Eastman Kodak Company	
	2. 1 Sheet(s) of drawing(s)	 Certified copy of a priority 	
		8. document. Associate Power of Attorney	
	3. X Information Disclosure Statement Under 37 CFR	G. Passociate I ower of Patients	
	1.97.		
	 Combined Declaration for Patent Application and Power 	of Attorney:	
4a. X New Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)			
000	 Incorporation by Reference (useable if Box 4b is 	9. <u>Deletion of Inventor(s)</u> .	
C	checked) The entire disclosure of the prior application, from	Signed statement attached deleting inventor(s) named	
Q.	which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and		
is considered as being part of the disclosure of the accompanying 1.33(b).			
application and is hereby incorporated by reference therein.			
0)	10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,		
	after the title, by inserting the following:		
ļat.	-CROSS REFERENCE TO RELATED APPLICATION		
Pade .	Reference is made to and priority claimed i	folii U.S. Flovisionai Application Seriai 100.	
1	filed, entitled. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:		
LU LU	If a CONTINUING APPLICATION, check appropriate box and supply the requestic information: 11. Continuation Divisional Continuation-in-part (CIP) of prior application No: 2		
just:	12. X Please address all written communications to Paul A. Leipold, Patent Legal Staff,		
	Eastman Kodak Company, 343 State Street, Roches	er, NY 14650-2201.	
Please Direct all telephone calls to Lynne M. Blank at (716) 477-7418.			
l	The filing fee has been calculated as shown below:		
1	FOR: NO. FILED NO. EXT	RA RATE FEE	
	BASIC FEE	\$ 740	
1	TOTAL CLAIMS 35 - 20 = 15	x 18 = \$ 270	
1	INDEPENDENT CLAIMS 2 - 3 = 0	x 84 = \$ 0	
1	MULTIPLE DEPENDENT CLAIM PRESENTED	+ 280 \$0	
		TOTAL \$ 1010	
X Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of \$ 1010.			
A duplicate copy of this sheet is enclosed			
X The Commissioner is hereby authorized to charge any additional filing fees required under			
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.			
A duplicate copy of this sheet is enclosed.			
		V. m. R.O. A	
		Lynne M. Blank	
		ittorney for Applicants	
	Telephone: (716) 477-7418	egistration No. 42,334	
10	Facsimile: (716) 477-1148		